| AMENDMENT TRANSMITTAL LETTER   |   |   |                                   |         |              |            | Docket No.<br>0054-0343PUS1 |  |
|--|---|---|-----------------------------------|---------|--------------|------------|-----------------------------|--|
| Applicatio   |   | Filing Date                             |                                   |         | Examiner     |            | Art Unit                    |  |
| 10/567,789-Cd  | onf. #2692                                | February 9, 2006 T. A. Braina           |                                   |         | ard          | 3662       |                             |  |
| plicant(s): Tos  | hio WAKAYAN                               | IA et al.                               |                                   |         |              |            |                             |  |
| rention: RADAF   | R DEVICE                                  |   |                                   |         |              |            |                             |  |
| S Amendment<br>emmissioner for<br>D. Box 1450<br>exandria, VA 223                  |   |   |                                   |         |              |            |                             |  |
| ransmitted here  |   | ndment in the                           | above-identif                     | ied ap  | plication.   |            |                             |  |
| he fee has beer  | calculated an                             | d is transmitte                         | d as shown b                      | elow.   |              |            |                             |  |
|  |   |   | S AS AMEN                         | DED     |              |            |                             |  |
|  | Claims<br>Remaining<br>After<br>Amendment | Highest<br>Number<br>Previously<br>Paid | Number<br>Extra Claims<br>Present |         | Rate         |            |                             |  |
| Total Claims   | 23  | - 23 =                                  | 0                                 | х       | 50.00        |            | 0.00                        |  |
| Independent<br>Claims  | 1   | - 3 =                                   | 0                                 | ×       | 210.00       |            | 0.00                        |  |
| Multiple Depend  | lent Claims (ch                           | eck if applicabl                        | e)                                |         |              |            |                             |  |
| Other fee (pleas   | e specify):                               |   |                                   |         |              |            |                             |  |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:   |   |   |                                   |         |              | 1          | 0.00                        |  |
| x Large Entity   |   |   |                                   |         | Small Entit  | ty         |                             |  |
| x No additiona   | I fee is require                          | d for this amer                         | ndment.                           |         |              |            |                             |  |
| Please charg   | ge Deposit Acc                            | ount No.                                | ì                                 | n the a | mount of \$  |            |                             |  |
| A duplicate of   | copy of this she                          | et is enclosed                          | •                                 |         |              |            |                             |  |
| A check in the   | ne amount of \$                           |   | is enclo                          | sed.    |              |            |                             |  |
| Payment by   | credit card. Fo                           | orm PTO-2038                            | is attached.                      |         |              |            |                             |  |
| X The Director as described  | is hereby auth                            |   |                                   |         |              | No0        | 2-2448                      |  |
| redit ai   | overpaymen                                | ıt.                                     |                                   |         |              |            |                             |  |
| x Charge   | ny additional fili                        | ng or applicatio                        | n processina i                    | fees re | auired under | r 37 CFR 1 | .16 and 1.17.               |  |
|  |   |   |                                   |         | Detect       | Cantamba   | er 10, 2008                 |  |
| D. Richard And   | erson                                     |   |                                   |         | Dated.       | Septembe   | 91 10, 2006                 |  |
| Attorney Reg. N  | lo.: 40,439                               |   |                                   |         |              |            |                             |  |
| BIRCH, STEWA<br>8110 Gatehous<br>Suite 100 East<br>P.O. Box 747<br>Falls Church, V | e Road<br>irginia 22040-                  | ·                                       | .P                                |         |              |            |                             |  |
| (703) 205-8035   |   |   |                                   |         |              |            |                             |  |